**ATTACHMENT B**

**RFI-21-66669**

**RESPONDENTS NAME: Pinnacle Treatment Centers IN-I, LLC (Pinnacle Treatment Centers, Inc.)**

**Please complete the yellow shaded boxes below. The fields can expand as needed.**

**SUBMISSION REQUIREMENTS**

DMHA asks that all Respondents provide information in the following areas:

**Interest in Participation**

1. Please confirm and describe the vendor’s interest and commitment to establishing one or more Opioid Treatment Programs in the State of Indiana.

|  |
| --- |
| Pinnacle Treatment Centers, Inc. (Pinnacle) strives to make recovery possible by transforming lives, communities and families we serve with treatment that works. We envision a better world where lives and communities are made whole again through our comprehensive treatment of individuals with substance use disorders. In alignment with our mission and vision, Pinnacle is proposing to open an Opioid Treatment Program (OTP) in the state of Indiana, following our model of care and best practices throughout our continuum. Pinnacle treats over 32,000 patients each day in all levels of care from Inpatient Detox, Residential, Intensive Outpatient, Ambulatory Care, Supportive Housing, Partial Hospitalization, Opiate Treatment Programs, Outpatient and Office Based Treatment Programs.  Pinnacle Treatment Centers IN-I, LLC has been in operation in Indiana for over 3 years and currently operates two licensed and accredited residential treatment programs in Merrillville and Cambridge City with plans to add an additional treatment location in Martinsville by late summer – early fall 2021. Our proposed Martinsville location will be connected to the proposed OTP location and will provide a fully integrated delivery model of care from the highest acuity in a residential setting to outpatient services supported by sober housing. Our goal is to remove all barriers to a patient that would prevent them from receiving treatment including those individuals who are receiving medication assisted treatment, such as methadone. Evidenced based treatment such as medication assisted treatment should be an integral part of the continuum of care. Please see attachment #1, a preliminary site and floor plan for our proposed Martinsville addiction treatment campus. |

1. Please confirm the vendor’s ability to meet or exceed requirements listed in “Vendor Requirements” outlined in the RFI.

|  |
| --- |
| Pinnacle Treatment Centers, Inc. (Pinnacle) is committed to remaining in compliance with all levels of care currently provided in Indiana and will ensure compliance for future Opioid Treatment Programs. We are not currently licensed as an OTP in the state; however, we operate 89 OTPs in seven (7) states and we will seek certification and licensure with the appropriate local, state and federal entities to ensure compliance pursuant to the Indiana Code, Rules and Policies and all local, state and federal laws.  Pinnacle intends to submit an application with Indiana Department of Mental Health and Addictions Services (DMHA) to obtain certification for a Private Mental Health Institution (PIP) under Article 1.5 to allow for the continuum of care with the proposed OTP. Our existing addiction treatment facilities in Indiana are licensed, certified and in good standing with licensing and accrediting bodies as demonstrated by the attached certificate from DMHA for our Recovery Works Cambridge City and Recovery Works Merrillville locations. Pinnacle is actively in the process of building a comprehensive treatment campus in Martinsville to provide inpatient detoxification, transitional living, ambulatory care and medication assisted treatment.  Pinnacle successfully operates 89 OTPs in California, Georgia, Kentucky, Ohio, Virginia, New Jersey and Pennsylvania, which require the same or similiar licenses to operate an OTP in Indiana. It is our intent to follow the regulations and protocols which have been established to obtain our Indiana Department of Mental Health and Addictions Services (DMHA) Addictions Services Provider certification, Drug Enforcement Agency (DEA) registration, Board of Pharmacy (BOP) permit, Center for Substance Abuse Treatment OTP Provisional Certification (CSAT), CARF accreditation and the CMS Clinical Laboratory Improvement Amendments (CLIA) Certificate of Waiver.  As part of our on-going efforts to ensure the safety and security of treatment medications, the facility, clients, visitors and staff, we will comply with IAC 440 along with DEA regulations, BOP rules, best practice guidelines from CSAT and CARF accreditation standards. Policies and procedures are written and followed, not only to meet the regulation, but to exceed it. Our programs have a diversion control plan, security system including panic buttons, glass sensors, cameras and security personnel as needed. Narcotic safes maintain the supply of medications that are utilized in our facilities and meet all required DEA requirements for secure storage of medications per §1301.72. Each Pinnacle OTP has a Diversion Control Plan that complies with all DEA regulations as well as any BOP requirements, as required. Our facilities have a security system and devices which meet all federal regulatory requirements to ensure the safety and security of the facility.  Pinnacle recognizes that workforce is a valued resource and has made significant investments in developing staff through the provision of training and in-services. Supervisory personnel are expected to coach and mentor staff by following the concept of modeling appropriate professional behavior while demonstrating the values of individual competency, personal integrity, mutual respect and ethnic and cultural diversity. Staffing requirements provided by IAC Title 440 Article 10 will be followed and met with assistance from our Chief Personnel Officer, Talent Partner, Recruiters and Vendors conducting background checks and pre-employment drug testing. The Pinnacle OTP staffing model includes at a minimum, a Medical Director, Program Director, Clinical Supervisor, Certified or Licensed Counselor(s), Nurses, Support Staff and Security Personnel. In addition to the minimum staffing positions, intake and client early engagement teams, quality improvement, and health and safety committees are established. Nurse Practitioners are hired to provide support to Physicians and Medical Directors with physical examinations, assessments, treatment team, and on-going prenatal eduction and check-ins with our pregnant population. |

**Experience & Qualifications**

1. Please provide an overview of the vendor’s experience starting up and operating medication assisted treatment including OTPs.

|  |
| --- |
| Pinnacle Treatment Centers, Inc. (Pinnacle) was established 14 years ago in Pennsylvania and New Jersey. Since then, we have expanded to Indiana, Ohio, Virginia, Kentucky, California and Georgia. Pinnacle’s focus is to develop a fully integrated delivery model of care providing the full spectrum from the highest acuity in a residential setting to outpatient services supported by sober housing. It is our goal to make treatment available and to provide services within all types of environments to meet the individual where they are in the disease cycle.  Pinnacle locations are carefully chosen based upon an analysis of qualitative and quantitative data which can include among other factors, an examination of the demographics, unmet needs of the community, and input from community stakeholders.  During the last five (5) years, Pinnacle has established 15 DeNovo OTP Facilities within Ohio and New Jersey, one (1) 3.7 Detoxification and one (1) Residential Treatment facility in Ohio, which provide inpatient, withdrawal management, partial hospitalization, intensive outpatient and outpatient treatment; two (2) Residential Treatment / Sub-Acute treatment facilities in Indiana, which provide detoxification, inpatient, and intensive outpatient treatment; two (2) Partial Hospitalization Programs with housing in Virginia; and three (3) Residential Treatment facilities in Kentucky which provides withdrawal management, residential, partial hospitalization, intensive outpatient with recovery housing along with medication assisted treatment services.  Pinnacle has a committed development and leadership team comprised of corporate licensing and regulatory specialists, data analysist, construction and real estate managers, compliance and quality supports, field managers, patient navigators, call center specialists, as well as operations staff. |

**Business Relationships**

1. Please describe your existing relationships with other OTPs in the State of Indiana.

|  |
| --- |
| Pinnacle’s existing residential treatment centers – Recovery Works Merrillville and Recovery Works Cambridge City have established relationships throughout their communities with OTPs in the state of Indiana. Recovery Works Cambridge City has worked with two (2) existing OTPs in Richmond, Indiana. During treatment, patients who are diagnosed with opioid use disorder, receive education about medication assisted treatment (MAT) and are offered Buprenorphine if clinically and medically appropriate. Patients are maintained and then referred to an X-Waivered Buprenorphine provider for on-going care in their home community. Vivitrol is an option for patients with Opioid Use Disorder (OUD) and can be administered on-site prior to discharge from the residential treatment program.  Recovery Works Merrillville incorporates medication assisted treatment during detoxification as a step down or taper during the residential component of treatment, as needed, as well as a maintenance MOUD. Patients are prescribed medications based upon their drug of choice, severity of withdrawal and overall health. Referrals to local OTPs are provided to patients who may need to continue their medication assisted treatment. |

1. Please describe your existing relationships with Community Mental Health Centers.

|  |
| --- |
| Recovery Works Merrillville has established relationships with Regional Mental Health locations in Hammond, Merrillville and East Chicago, Indiana in an effort to provide cross referrals and additional options for patients’ during discharge and continuing care planning. In addition, Pinnacle has built relationships with CMHCs and other public and private partners throughout the country, understanding that co-occuring treatment collaboration and options are a necessary component to a patient’s success. |

1. Please describe your existing relationships with hospitals licensed under IC 16-21.

|  |
| --- |
| Recovery Works Merrillville has established relationships with Methodist Southlake Hospital which is in close proximity to the facility and has the capability of treating emergency cases when necessary. Franciscan Health Dyer Hospital is a referral resource for individuals requiring step-down services. Recovery Works Cambridge City primarily serves individuals with addiction that have HIP or Indiana Medicaid as a payor source; therefore, the facility works with hospitals across the state to ensure the appropriate referrals are given to individuals. |

**Community Experience**

1. Please describe your experience promoting community integration and acceptance of medication assisted treatment including OTPs.

|  |
| --- |
| In an effort to reduce the stigma associated with medication assisted treatment and the substance abuse population, Pinnacle promotes awareness of effectual treatment approaches through the promotion of treatment needs, efficacy and methodologies while simultaneously improving the relationship(s) with the surrounding community.  Pinnacle leaders are engaged with each community in which we operate. This is done in a variety of ways that include working with local hospitals, criminal justice systems, first responders, local coalitions, Chamber of Commerce, and other treatment providers. Pinnacle has two (2) OTP leaders who are on the board of the American Association for the Treatment of Opiate Dependence (AATOD) where educating local and federal legislators is at the forefront.  Our facility directors coordinate and execute public relations and education activities that may include didactic sessions as a response to a community agency that seeks additional information about substance abuse, treatment modalities and professional development in the substance abuse field. Many of our Pinnacle team members participate in health fairs, community task forces, mental health and HIV related activities to gain awareness as well as serve on steering committees that address community needs. In addition, patient advocacy programming, which includes community engagement and education, is provided throughout the Pinnacle continuum of care. Pinnacle is committed to participating in local, state and national events which advocate for the reduction of the stigma associated with substance abuse and recovery. |

1. What are the critical success factors in promoting community integration and acceptance of medication assisted treatment and OTPs?

|  |
| --- |
| The identification of key stakeholders within the community is a critical factor in being successful with the acceptance of OTPs and medication assisted treatment. Pinnacle leadership and team members work to establish relationships and linkage agreements while providing education and awareness to the following groups:   * Educational and vocational resources; * Hospitals; * Healthcare clinics; * Mental Health centers and practitioners; * Senior / Adult Services; * Law Enforcement; * Religious Centers; * Public Officials; * Health and human service agencies; * Local businesses; * Neighbors and Stakeholders; and * Chamber of Commerce.   By reducing the stigma around medication assisted treatment, those persons who wouldn’t seek care before have less barriers in front of them. A successful integration example is how our OTPs, in other states, build relationships with social services, OBGYNs, and hospital delivery units prior to a mother delivering a child while she is in treatment and on medication for her Opioid Use Disorder. Without this education and integration, the new mother would potentially be ”flagged” as a drug user and child protective services would be notified to have the newborn removed from her care. Pinnacle works to ensure networks are built within the communities we operate in with the hopes of providing additional support for our patients. It is our belief that the involvement and support of family and criminal court judges are critical to the success of many of our patients. |

1. Response must include a minimum of one letter of support from each of the following: elected city official, elected county official and city or county law enforcement.

|  |
| --- |
| Please find attachment #2 letters of support from the following individuals:   * Mr. Ken Costin, City of Martinsville Mayor * Major David A. Rogers, Morgan County Sheriff’s Office * Mr. Kenneth Hale, Morgan County Commissioner |

**Medications / Protocols**

1. Please describe current medication and treatment protocols utilized in your existing addiction services. If necessary, please include additional information as a separate attachment in your response to this RFI.

|  |
| --- |
| Pinnacle Treatment Centers, Inc. (Pinnacle) embraces the concepts of client and family participation and a balanced perspective of adult functioning including the use of personal strengths in combating the dysfunctional effects of substance abuse and dependency. Pinnacle utilizes a team of Physicians, Mid-Level Providers, Nurses, Case Managers and Counselors to provide FDA approved medications for Opioid Use Disorders. It is the policy of this organization to utilize methadone, depot naltrexone (Vivitrol) or buprenorphine for clients meeting the diagnostic criteria for opioid use disorder once the facility has been granted allowances by the State licensing body as endorsed by the State Opioid Treatment Authority (SOTA), CSAT, DEA and the state Board of Pharmacy as required.  Methadone has a two-week induction protocol that is individualized to provide safety as the dose is increased to a level that blocks cravings and eliminates withdrawal symptoms while monitoring for symptoms of overmedication followed by stabilization and maintenance. Buprenorphine is prescribed for individuals who present with adequate withdrawal symptoms and recommendations by the prescribing physician or expressed preference for this medication. The induction period is shorter due to the superior safety profile of Buprenorphine. Once a client has reached a dosage which blocks cravings and eliminates withdrawal, they will follow the stabilization and maintenance protocols, which are similar to the protocols for Methadone clients. Depot Naltrexone (Vivitrol) is prescribed in conjunction with our residential treatment programs and locations with structured housing after the initial dosage.  Our clients attend individual and group counseling sessions to develop a recovery plan that addresses behavior modification, self expressed needs, problems, strengths and goals of each client. Pinnacle ensures each client has an individualized and comprehensive treatment plan that is geared toward the unique physical, psychological, emotional and spiritual needs of clients through direct services, contract or by referrals to appropriate community resources. Our Medical, Nursing and Clinical Services staff members make every effort to address the co-occurring needs of individuals involved in our care. Upon entering treatment, individuals are asked to disclose pertinent past, current and potential healthcare conditions, which may require medical intervention and care is coordinated with healthcare practitioners to ensure the safety of individuals and risk of contra-indications.  Pinnacle’s pharmacotherapy practices will address:   * Access, when needed, through direct provision or referral; * Continuity of pharmacotherapy; * Integration of medications into an individual’s overall plan; * Identifying and documenting medication reactions as well as actions to follow in case of an emergency related to the use of medications; * Availability of a physician for consultation 24 hours per day, 7 days a week; * Review of past medication use and addressing effectiveness, side effects and / or allergies or adverse reactions; * Screening for common medical co-morbidities using evidence or census based protocols; * Evaluation of co-existing medical conditions for potential impact; * Identification of alcohol and other drug use; * Documentation and reporting of medication errors; * Use of over-the-counter medications and medications by women of child-bearing age; * Management of bio-hazards associated with the use of medication and access to poison control; * Notification of any other healthcare practitioners of the use and / or contraindications of prescribed medications; * Coordination of healthcare treatment plans and medical management; and * Ensuring all policies and procedures for prescribing, dispensing, or administering medications are provided within the field industry best practices and sound prescribing guidelines.   Pinnacle is providing a sample of our confidential policies and procedures related to treatment and medication protocols to provide a deeper understanding of our philosophy and treatment in our Opioid Treatment Programs (OTP) as Attachment #3. |

**Proposed Location(s) and Services**

**In an effort to meet Governor Holcomb’s goal of having treatment for opioid use disorder within one hours drive for every Hoosier, FSSA/DMHA has identified the following counties as potential locations for a new Opioid Treatment Program: Dubois, Fountain, Fulton, Jackson, Jefferson, Kosciusko, LaGrange, Marion, Orange, Perry, Rush, Warren or a county that surrounds or borders one of the identified counties.**

1. Select a county from the above list then provide the following details for the proposed location(s):
   1. Full address including ZIP Code(s)-Vendor may provide multiple addresses but must include pros and cons of each location including any potential zoning issues.
   2. Rationale for selection
   3. Existing relationships in the proposed location’s community
   4. Driving time from nearest existing OTP
   5. Proposed hours of operation
   6. Proposed clinic features (e.g., number of group rooms, therapist offices, dosing windows, etc.)
   7. Proposed steady-state staffing levels, by position
   8. Proposed size (in square feet)
   9. Proposed expansion potential
   10. Proposed parking capacity
   11. Proposed solutions to manage client traffic during high demand hours of the day

|  |
| --- |
| Pinnacle has completed a market analysis, assessing unmet need throughout Indiana, while focusing on the areas identified by FSSA / DMHA. An extensive real estate search was conducted and Pinnacle identified a location to provide ASAM levels of care on one (1) campus which will be located at:  1(a) 452 Grand Valley Boulevard  Martinsville, IN 46151  (b) Martinsville was chosen as our proposed location to meet the unmet needs of the community and its proximity to Indianapolis and Bloomington. Our research and market analysis demonstrates that of the 2.1 million residents (within 60 miles of Martinsville), 70,000 individuals will make an effort to seek treatment in their lifetime. Of these 70,000 individuals, it is our estimation that more than 7,000 will utilize a residential treatment program. In addition, we estimate the treatment population for an OTP within Morgan County would equate to more than 300 patients per day. The Martinsville location will allow Pinnacle to increase accessibility to treatment, referrals for appropriate level of care, and continuity of care through the spectrum of services that will be offered at the campus setting location. (\* *Our estimations are derived by utilizing demographic data which includes but is not limited to, overdose death rates, prescribing rates and other standard metrics as set forth by SAMHSA for determining high need withing communities*)  (c) Pinnacle Treatment Centers does not currently have facilities within this area; however, as part of our committment to the communities and ensuring stakeholder involvement, Pinnacle’s CEO, COO, Development and Patient Navigator team has been working to establish relationships with the City of Martinsville Mayor, City Superintendent, City Legal Counsel and the Director of Planning and Engineering. In an effort to foster relationships with the local probation office, our leadership team has met with and discussed the proposed location with the leadership at Morgan County Probation Department. In addition, Pinnacle is partenering with trauma informed care providers to ensure patients have access to both mental health and substance abuse providers throughout their care and post discharge from residential level of care.  (d) The driving time from our proposed location to the nearest OTP (Limestone Health Bloomington) is 22.9 miles (estimated 26 minutes). This is within the requirements of being no closer than 20 miles to the nearest OTP provider. It is the experience of Pinnacle that patients benefit from having services within a 30 minute drive time, so they can live and work within their community. This is especially true in rural locatons where public transportation is limited or not available.  (e) The proposed hours of operation will align with our existing OTPs throughout the Pinnacle network. Monday – Friday 5:30am – 11am for medication and 5:30am-2pm for counseling / non-medication services. Weekend hours of operation are proposed to be 7am-9am.  (f) Opioid Treament Programs within the Pinnacle network typically have one (1) to two (2) group rooms, four (4) to eight (8) counseling offices, three (3) dispensing windows, two (2) reception windows, one (1) laboratory, one (1) exam room, two (2) restrooms with handicap access and a large waiting area. We will adjust the clinic features based upon the size of the facility while following all regulations.  (g) Staffing positions will be based upon IAC 440 requirements as well as Pinnacle’s philosophy of treatment. Pinnacle will employ at least one (1) Medical Director, one (1) Executive Director, one (1) Nurse Supervisor, two (2) Nurses with additional nurses as needed for additional census, one (1) Medical Assistant, one (1) to two (2) Receptionists, one (1) Clinical Supervisor (per 10 Counselors), and one (1) Counselor per 55 patients.  (h) The proposed location is expected to be 3,000 - 4,000 SF  (i) Pinnacle will have expansion potential up to 1,500 SF  (j) It is estimated that our proposed location will have at least 30 on-site parking spaces with the capability to expand approximately five (5) to seven (7) parking spaces. Handicap parking spaces will be identified appropriately.  (k) Historically, Pinnacle has developed relationships with the local law enforcement to provide off duty detail to assist with the flow of traffic, as needed. |

1. Please describe co-located addiction treatment programs proposed.

|  |
| --- |
| At this time, Pinnacle Treatment Centers is not proposing a co-located addiction treatment program as defined by the Department; however, our proposed Martinsville campus will provide access of services for each level of care throughout the continuum, including ASAM Levels of Care 1, 2 and 3. It is our experience that patients often need access to higher levels of care when receiving treatment in an OTP to help address on-going polysubtance abuse of medications or drugs that interfere with medication prescribed to treat their OUD. Pinnacle has established protocols to work with the federal and state authorities to keep the patient stabilized on methadone or buprenorphine by continuing to provide their daily MOUD and while they stabilize and / or detoxify from other harmful substances. It is also our belief and experience that when a patient leaves a level 3.7 (detox), it is essential for them to transition to 3.5 (residential), then 3.1 (day treatment with recovery housing) before they transition home to a level 2 or 1 outpatient level of care. The transition throughout the continuum of care gives the patient the best opportunity to be successful in their recovery. Pinnacle has extensive experience providing successful transitions between these levels of care as evidenced by our programs in Kentucky, Ohio, and Virginia. |

1. Please describe your clinical approach to treating women who are pregnant with an opioid use disorder.

|  |
| --- |
| Methadone and MAT is the gold star treatment for pregnant women with opioid use disorder. Pinnacle follows best practice guidelines from SAMHSA and works closely with OB/GYNs and local hospitals, social workers, and other treatment providers to ensure the safest treatment is provided. It is the belief of our Pinnacle medical team that maintenance treatment dosage levels of pregnant patients will be maintained at the lowest possible dosage level and prenatal care is followed throughout the process. Patients have additional sessions with the facility physician(s) and nurse practitioners, receive education regarding proper nutrition, Neonatal Absintence Syndrome (NAS), and parenting training including newborn care, handling and health and safety. Our OTPs offer groups for post partum women in addition to those available during pregnancy. Pinnacle participates in the Plan for Safe Care and Recovery Oriented System of Care in our OTPs. Pregnant patients are provided with a Pregnancy Handbook to assist them throughout their treatment and prenatal care which is reviewed during group and individual counseling sessions with their primary counselor. |

1. Please describe the coordination of medication assisted treatment with the continuum of care available in your proposed location.

|  |
| --- |
| Pinnacle plans to provide wrap around services for patients and several levels of care including access to patient navigators, recovery support specialists, case managers and intensive outpatient therapists/groups. The proposed Martinsville location will provide the opportunity and accessibility for our patients to receive services regardless of where they are in the disease cycle. It is our intent to provide a campus setting which will include each of the levels identified in the chart below while ensuring a seamless transition between the levels of care. Each patient is unique in their needs and our model of care will provide accessibility to services that are identified during the screening and assessment process. Every patient has the right to choose where they receive services and should they choose to be referred to an outside provider, our staff will assist with the referral and transition as requested by the patient. (See attachment ”Flow Chart” as an example of our model) |

**Implementation**

1. Please describe the vendor’s proposed project timeline from approval to start of operations.

|  |
| --- |
| Our Martinsville location will be the site of several buildings to assist with the provision of services throughout the continuum of care. We are anticipating the construction and licensing of our Martinsville location can be achieved by the end of 3rd quarter 2021 based upon our experience with de novo projects. Zoning and construction delays are possible and we take this into consideration when we are developing projected timelines to obtain the Certificate of Occupancy and other required licenses and permits.  Pinnacle has begun the process of developing site plans and receiving approvals for the Private Mental Health Institution; therefore, we project we will be able to apply for licensure of this facility within the next three (3) – four (4) months and estimate an additional four (4) months to complete the licensure process, which will allow us to have a projected opening of this facility in the fall.  Based upon our experience constructing and opening OTPs in other states, Pinnacle is anticipating six (6) months as a timeline for opening the OTP. It is encouraging that the state is aware of the need for services and are willing to collaborate to accomplish opening the OTP in a reasonable timeframe. It is our intent to begin the licensure process with DMHA at the earliest time possible within the process to ensure the facility receives licensure and certification within our anticipated timeframe. Obtaining the DEA registration, BOP permit and CSAT approvals sometimes are delayed due to limited staffing of departments and workloads; however, we are optimistic that we will achieve the goal of opening the OTP within our anticipated timeframe. |

1. Please describe the vendor’s critical success factors in the start-up of a new OTP location.

|  |
| --- |
| Prior to establishing a lease and beginning construction, all zoning and council rules shall be met and it is imperative that the community be supportive of opening a treatment facility. It is Pinnacle’s model to establish relationships with local officials, law enforcement, hospitals, first responders, other providers and coalitions within the community. Pinnacle’s leadership team invests in the community by meeting in person and virtually with community partners and stakeholders. Pinnacle’s marketing team works with the local staff to build a network of providers to ensure communication about the opening is timely, develop linkage agreements and a referral network. In addition, critical success factors include ensuring recruiting and training of essential staff prior to the targeted opening and having experienced teams to support new staff and new programs. Community engagement and stakeholder communication is an important key to successfully opening and operating a new location. Pinnacle has established a SWAT DeNovo Team to assist with the successful start-up of a DeNovo location which includes a Special Projects Director, Floating Nurse and a Floating Clinical Supervisor. |